

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
Deb Fischer for US Senate

Full Name (Last, First, Middle Initial) <b>NORMA SIMMS</b>		Date of Receipt MM / DD / YYYY 09 / 19 / 2012
Mailing Address 4809 AU SABLE DR		Transaction ID : SA11.14533
City GIBSONIA	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00 CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) <b>SUSAN SIMMS</b>		Date of Receipt MM / DD / YYYY 09 / 19 / 2012
Mailing Address 4809 AU SABLE DR		Transaction ID : SA11.14199
City GIBSONIA	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00 CONTRIBUTION
Name of Employer WEST PENN ALLEGHENY HEALTH SYSTEMS	Occupation REGISTERED NURSE	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) <b>GERALD SIMONSEN</b>		Date of Receipt MM / DD / YYYY 07 / 06 / 2012
Mailing Address 774 RD 4300		Transaction ID : SA11.5059
City RUSKIN	State NE	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00 CONTRIBUTION
Name of Employer SELF	Occupation FARMER	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....

5250.00

TOTAL This Period (last page this line number only).....

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